STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

September 29, 2004

TO: CSD Regional Administrators
CSO Administrators
WorkFirst Coordinators

FROM: Duane French, Director
Division of Employment and Assistance Programs

Michael J. Hart, Field Operations Administrator
Community Services Division

Robert K. St.John, Director
Information Technology Division

SUBJECT: ENHANCEMENTS TO THE eJAS COMPONENT SCREEN AND REFERRAL PROCESS

Programming is complete for release of the enhancements to the eJAS referral process. Because of the magnitude of this job, the release of these enhancements will take place in two phases. The changes are outlined as follows:

PHASE 1

- Revises the Non-Contracted Monthly Verification form, which is renamed WorkFirst Participation Verification form.
- Streamlines the referral process to contracted providers. eJAS will only generate the forms needed to make a referral to a contractor.
- Streamlines the process for generating a WorkFirst Participation Verification form. When a contractor is not assigned to a component, eJAS will only generate the form needed for WorkFirst staff to monitor WorkFirst activities monthly.
- Generates the WorkFirst Participation Verification form, which will auto stamp eJAS notes that the form has been generated, what the required activities are, and the date the form must be returned. A new note type has been added specifically for these notes.
- Adds a link to this form from the individual's main page.
- Redesigns the component screen to allow WorkFirst staff to see component and contractor information on one screen.

PHASE 2

- Redefines system requirements on components PP, SA, SN, LP, PI, PU, II, RJ, CJ, RT, RA, RZ and HW. Depending on the component, contractors will no longer need to perform certain actions on their Contractor Caseload screen, e.g., accept/reject SA, SN components, monthly reporting will no longer be required on referral components, etc.
- Removes the above contractor related issues from the Caseload Management Report.

Phase 1 is scheduled for release October 18, 2004. Phase 2 will follow, and separate notification will be sent at that time.

To assist with familiarizing WorkFirst staff to these changes, the Division of Employment and Assistance Programs has developed a training packet that will walk eJAS users through the new process. In addition, the eJAS training site is available for local office training. This site is accessed through http://ejasdev.dshs.wa.gov/training/ejas.asp.

Your DSHS Regional WorkFirst Coordinator will assist with any of your training needs. If you have any other questions or concerns, please contact Brent D. Low at (360) 725-4633 or e-mail LowBD@dshs.wa.gov.

Attachment

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Tom Haines
Kelly Lindseth
Brent D. Low
Sandy Miller
Denny Naughton
Jennifer Thornton

Monthly Verification - Work Request Release

STEP-BY-STEP GUIDE

EJAS enhancements have been programmed to simplify the referral process. These enhancements are scheduled to be released on October 18, 2004.

With this change you will see:

- Changes to the Component/IRP screen.
- A smoother referral process, which will systematically give you only the forms you need.
- A revised Non-Contracted Monthly Verification Form, which is now renamed WorkFirst Participation Verification Form.
- A direct link to the WorkFirst Participation Verification Form from the client's main page.
- A new issue type called WF Part. Verification that will be auto stamped when a monthly verification form is generated.

This material gives you step-by-step instructions on how to use the new screens.

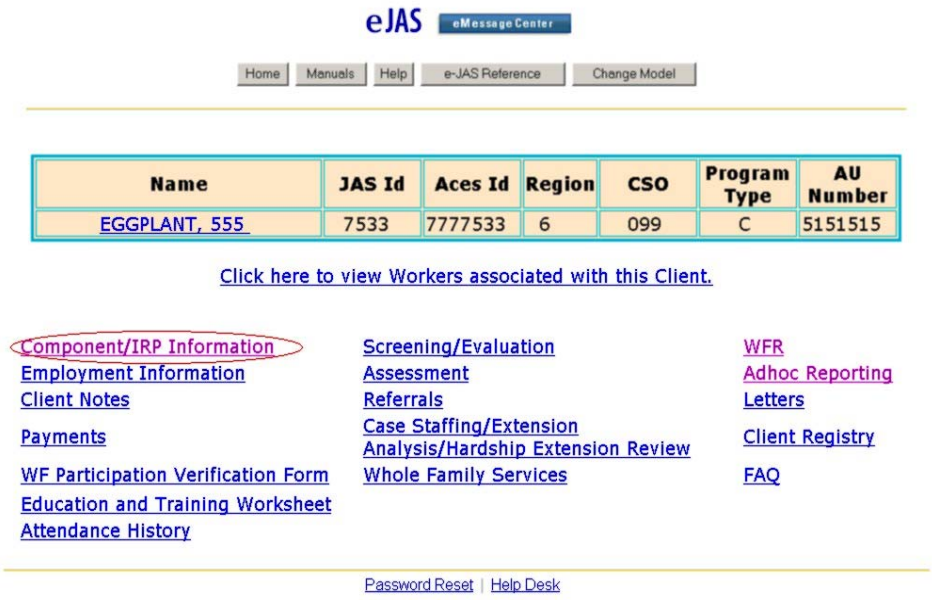
Shortly after this release, there will be one more change implemented to remove the contractor reporting requirements on particular components (PP, SA, SN, LP, PI, PU, II, RJ, CJ, RT, RA and RZ)

This change will modify the Contractor Caseload Screen so only the fields required to be completed on each component will appear. This will also remove these contractor issues from the Caseload Management Report.

If you need assistance with training, please contact your DSHS Regional WorkFirst Coordinator

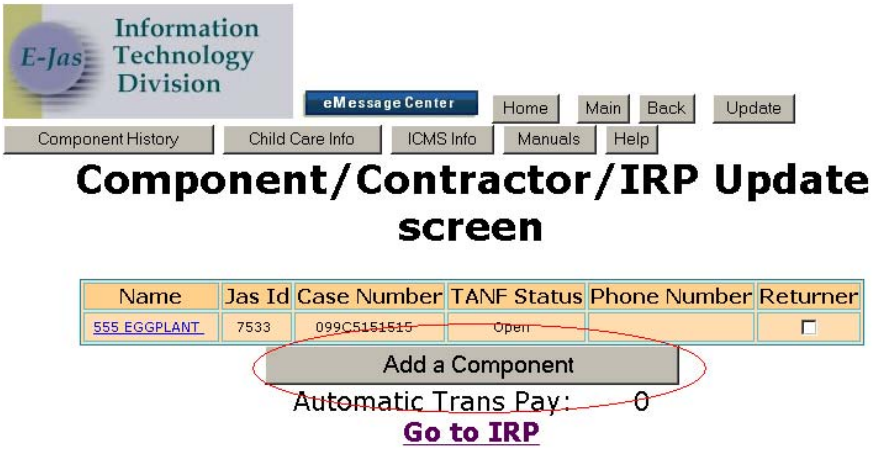
September 29, 2004

When opening components, depending on the component and whether or not a contractor is assigned, users will either be prompted to complete the Contractor Referral form, or the WorkFirst Participation Verification Form.

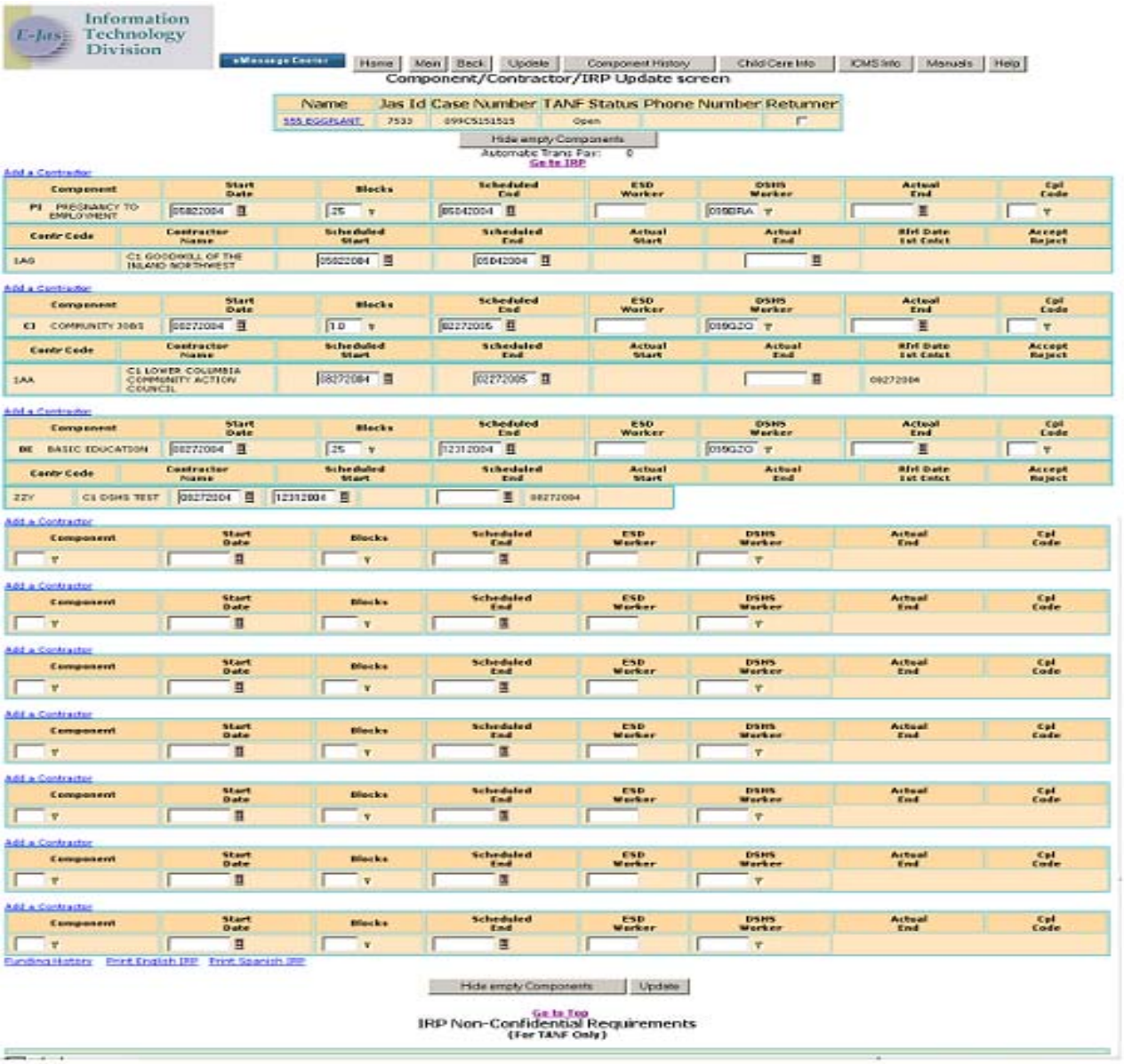


To Add a Component:

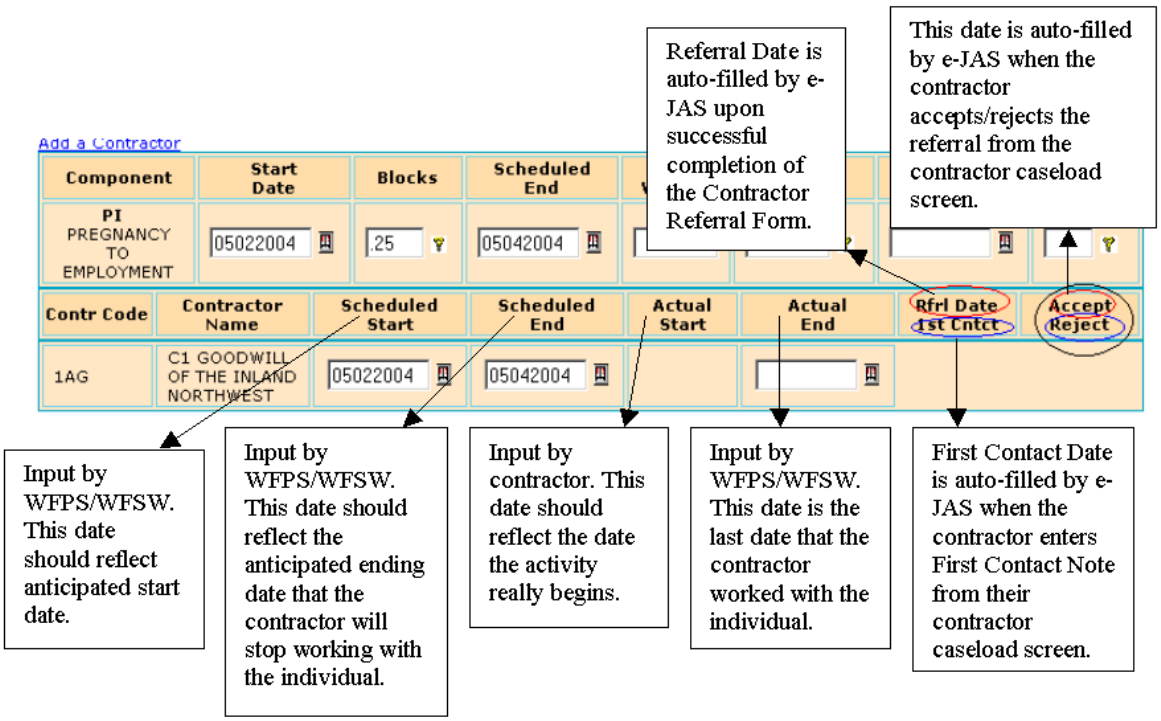
1. From the Component/Contractor/IRP Update Screen click “Add a Component”.



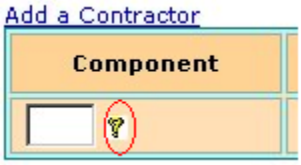
The Component/IRP page will still allow entry of up to10 components.


Information Technology Division
eMessage Center
Home
Mail
Back
Update
Component History
Child Care Info
IOMS Info
Manuals
Help
Component/Contractor/IRP Update screen
Name
Jas Id
Case Number
TANF Status
Phone Number
Returner
Hide empty Components
Automatic Trans For:
Go to IRP
Add a Contractor
Component
Start Date
Blocks
Scheduled End
ESD Worker
DSHS Worker
Actual End
Cpl Code
Contr Code
Contractor Name
Scheduled Start
Actual Start
Actual End
1st Date 1st Cntct
Accept Reject
Funding History
Print English IRP
Print Spanish IRP
Hide empty Components
Update
Go to Top
IRP Non-Confidential Requirements
(For TANF Only)

Section Explanation



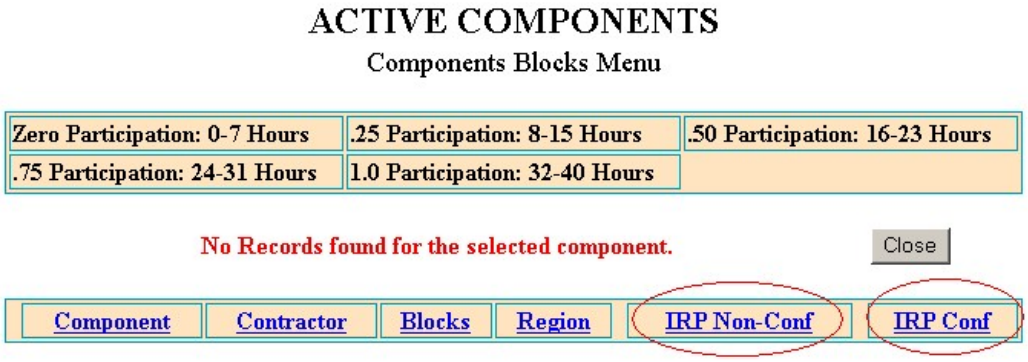
2. Enter the component code in the Component field. Click the question mark for help.



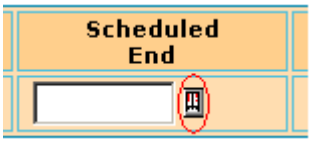
3. Enter the date that the client will begin services in the Start Date field. Click on the calendar for help.

4. Click on the question mark next to the Blocks field to select the client's level of participation.

Indicate if the IRP is Non-Confidential or Confidential.



5. Enter the date that the activity is scheduled to end in the Scheduled End date field. Click on the calendar for help.



6. Enter the DSHS worker ID in the DSHS Worker field. Click the question mark for help.

7. Update the IRP as needed.

8. Click Update.

If no contractor is assigned and the component requires a monthly reporting from a non-contracted provider, the user is prompted to complete the WorkFirst Participation Verification Form.

Completing the WorkFirst Participation Verification Form:

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
WORKFIRST PARTICIPATION VERIFICATION FORM

Home | Main | Print

Date: 9/ 1/ 2004

Client: 555 EGGPLANT	Jas Id: 7533	Aces Id: 7777533
Address:		
City: State: Zip Code: 0		

555 EGGPLANT was referred to you for services as part of his or her participation requirements for the WorkFirst program. We need to know if s/he did the activities outlined below and is making progress. Please use the comments section to tell us about any missed appointments or attendance problems, if you have identified any new issues that could interfere with her or his ability to work, or if s/he no longer requires your services. **Please complete and return this form by**

Required Activities:

Please fill in information below

Were all required activities completed for the month of January 2004 ?

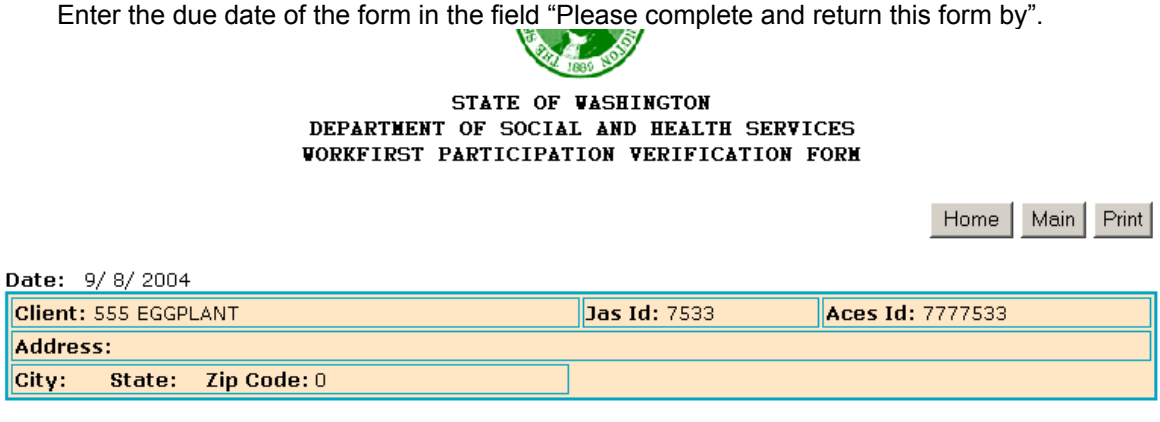
Yes ____ No ____

Comments (including missed appointments, attendance problems, progress towards resolving issues, new issues, or no further needed for your services):

Name:_____ Title:_____
Organization:_____ Phone:_____ Date:_____

Print

1. Enter the due date of the form in the field “Please complete and return this form by”.



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
WORKFIRST PARTICIPATION VERIFICATION FORM

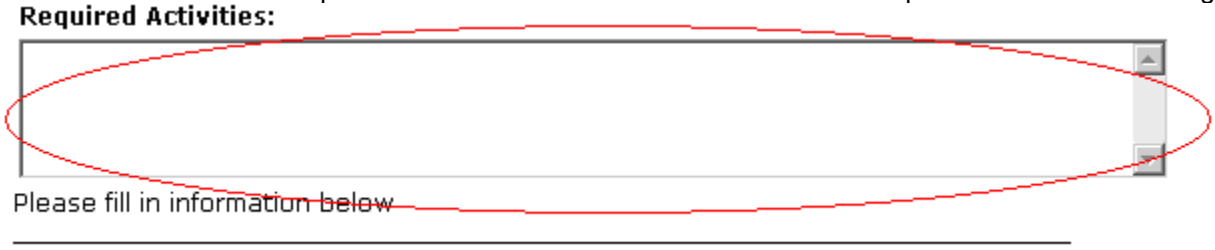
Home | Main | Print

Date: 9/ 8/ 2004

Client: 555 EGGPLANT	**Jas Id:** 7533	**Aces Id:** 7777533
Address:		
City: **State:** **Zip Code:** 0		

555 EGGPLANT was referred to you for services as part of his or her participation requirements for the WorkFirst program. We need to know if s/he did the activities outlined below and is making progress. Please use the comments section to tell us about any missed appointments or attendance problems, if you have identified any new issues that could interfere with her or his ability to work, or if s/he no longer requires your services. **Please complete and return this form by**

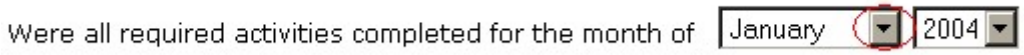
2. Enter the client’s required WorkFirst activities that the non-contracted provider will be monitoring.



Required Activities:

Please fill in information below

3. Use the drop down box to enter the month for which the provider is reporting.



4. Click Print.

5. The user will receive a message indicating the form has been saved.

6. Click OK.

7. The user will then receive a message indicating the process is complete.

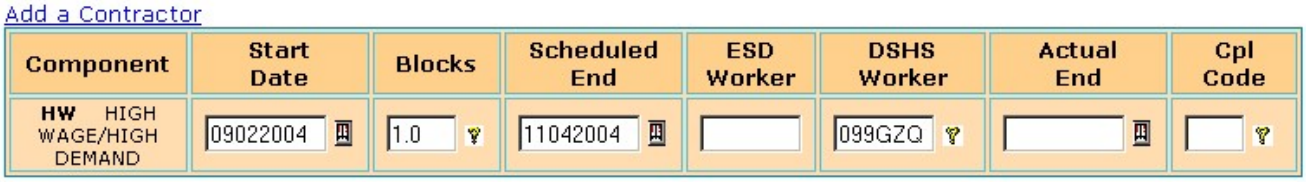
8. Click OK to return to the Main Menu.

9. Upon completion of this process, eJAS will auto stamp the note type “WF Part. Verification Form” that the form has been generated, what the required activities are and the date it is due.

Note: This issue type is confidential and is not available for direct worker input. Generating the monthly verification form is the only way text will show up under this issue type. This issue type has been added to the eJAS notes search options and Adhoc.

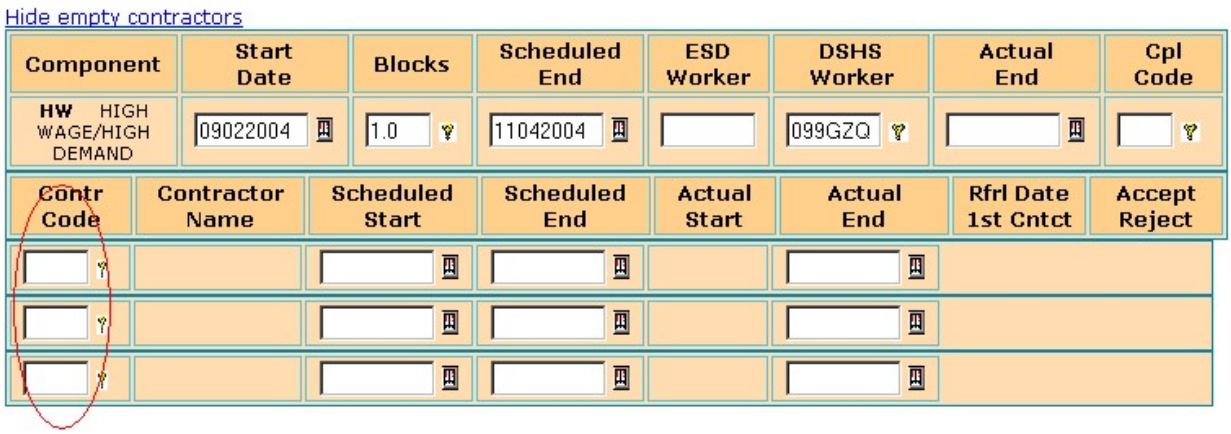
If the component is referred to a contractor, the user is prompted to complete the DSHS Referral Form.

To add a contractor to a component and complete the DSHS Referral Form:

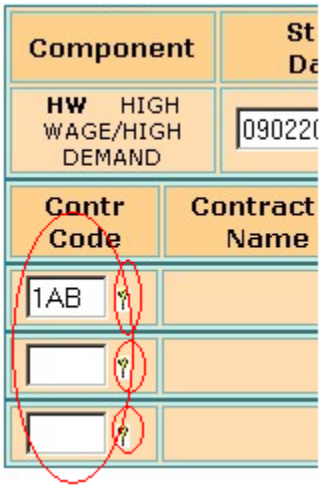


1. Click Add a Contractor next to the component for which you are adding a contractor.

Each component allows 3 contractor entries.

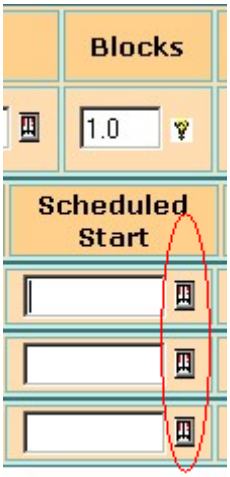


2. Enter the Contractor Code in the Contr Code field.

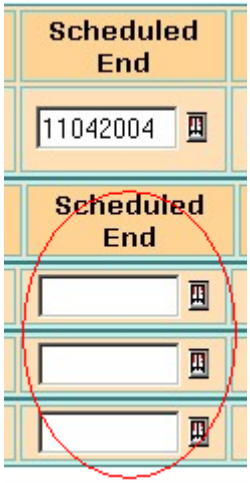


Click the question mark for help.

3. Enter the date the client is scheduled to begin services with the contractor in the Scheduled Start field.

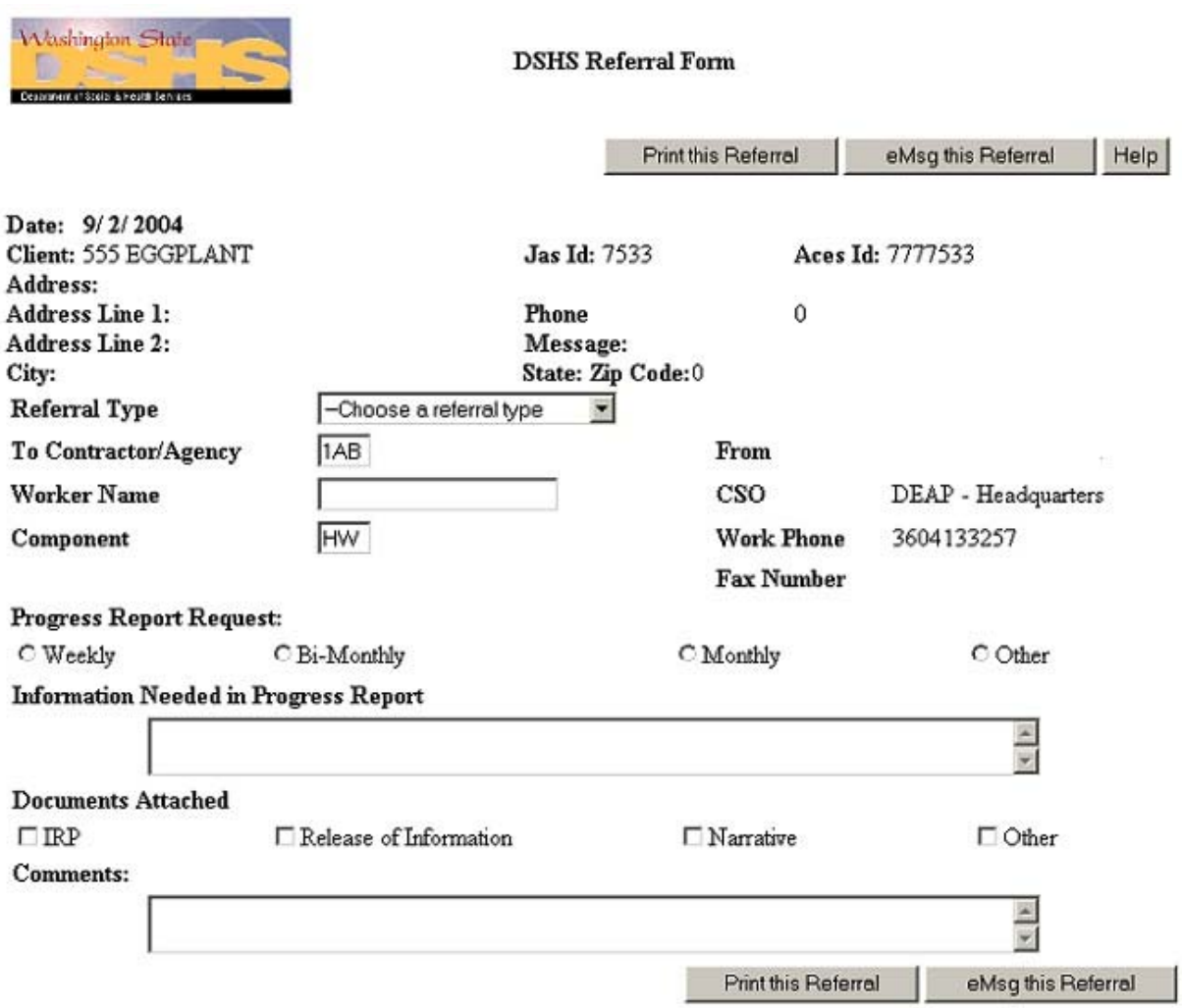


4. Enter the date the client is scheduled to end services with the contractor in the Scheduled End field.

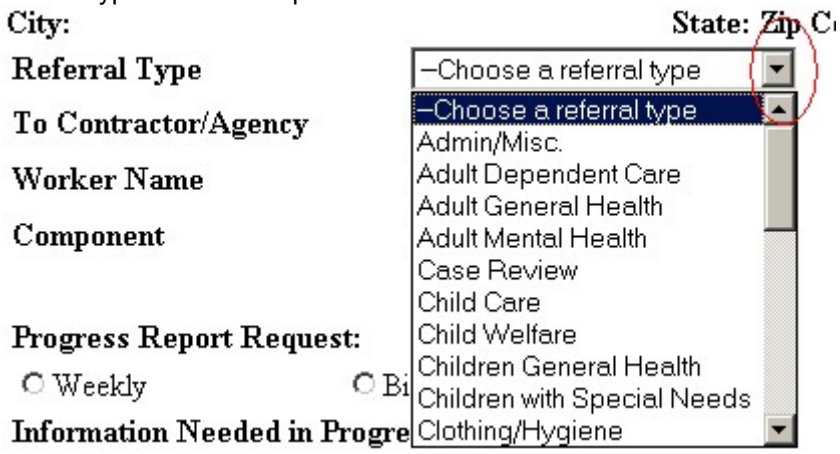


5. Click Update.

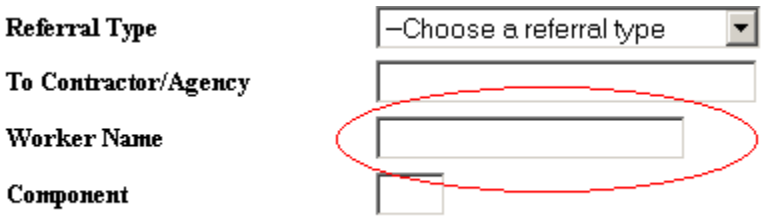
6. The DSHS Referral Form will display for the user to complete.



7. Choose the Referral Type from the drop down menu.

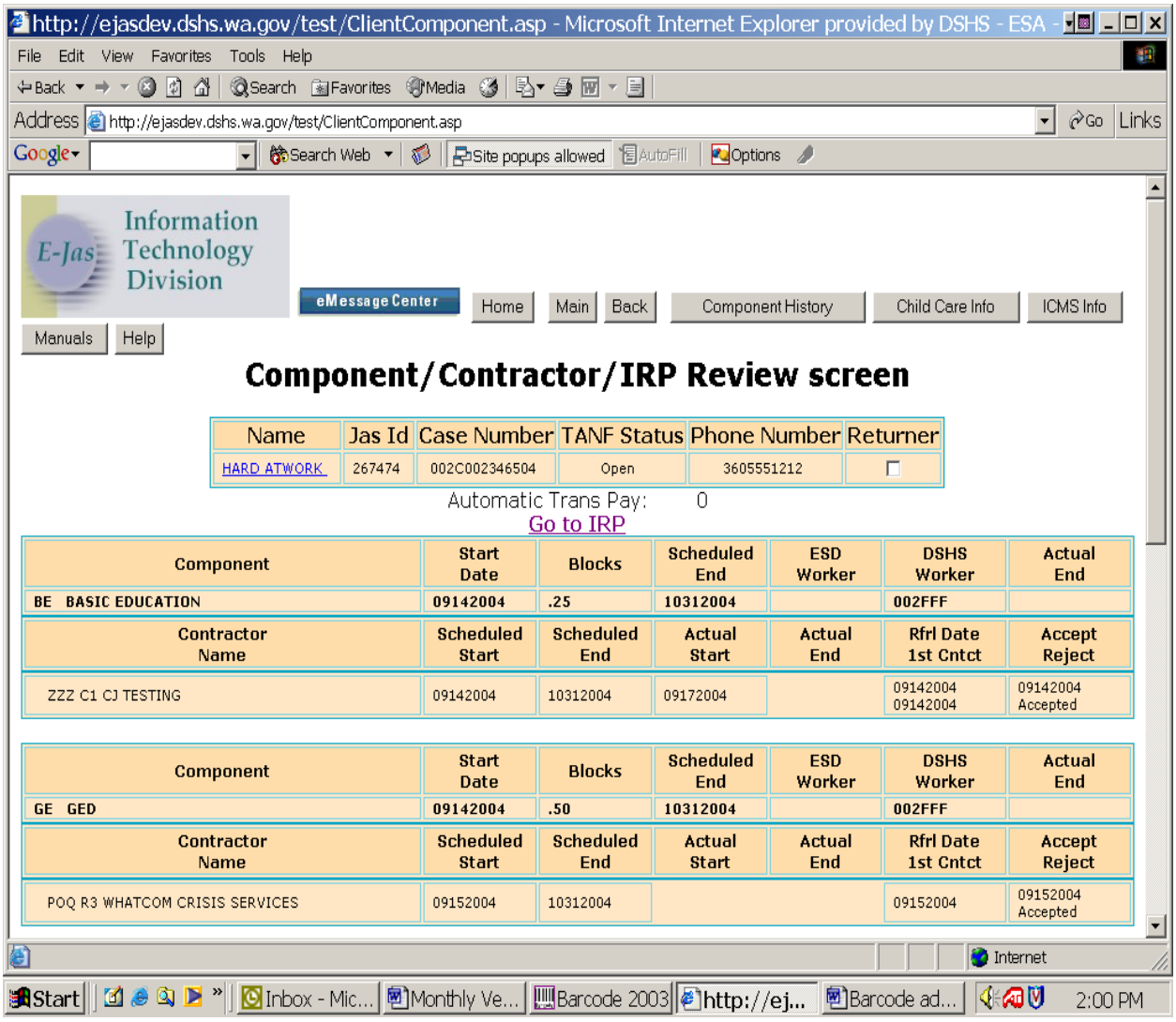


8. Enter the name of the worker to whom you are referring the client in the Worker Name field.



9. Complete the form as needed.
10. Click eMsg this Referral.

11. User will receive message that the Referral note has been saved and the e-message was sent.
12. Click OK.
13. User will receive a message that the Referral Form and/or WF Participation Verification Form process Completed.
14. Click OK to return to the client Main Menu.

Contractor View

The following is what non-DSHS users will see on the new component screen: